

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 3/05

Event Date <u>12/16/2013</u>
Page <u>1</u> Bro Event

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Thomas R Kneeland			Registration Number, if PAC			
Street Address 123 Serran Dr	Employer/Occupation/Labor Organization*		M 12	D 19	Y 13	Amount \$50.00
City Gahanna	State OH	Zip Code 43230-2940	Form (Cash, Check, etc.) Check			
Full Name of Contributor Arthur Lee			Registration Number, if PAC			
Street Address 189 N Nelson Rd	Employer/Occupation/Labor Organization*		M 12	D 19	Y 13	Amount \$50.00
City Columbus	State OH	Zip Code 43219-2967	Form (Cash, Check, etc.) Cash			
Full Name of Contributor Sarah J Rogers			Registration Number, if PAC			
Street Address 920 Montrose Ave	Employer/Occupation/Labor Organization*		M 12	D 19	Y 13	Amount \$50.00
City Columbus	State OH	Zip Code 43209-2452	Form (Cash, Check, etc.) Check			
Full Name of Contributor William K Weisenberg			Registration Number, if PAC			
Street Address 491 Havendale Dr	Employer/Occupation/Labor Organization*		M 12	D 27	Y 13	Amount \$100.00
City Westerville	State OH	Zip Code 43082-7413	Form (Cash, Check, etc.) Check			
Full Name of Contributor Arthur Lee			Registration Number, if PAC			
Street Address 189 N Nelson Rd	Employer/Occupation/Labor Organization*		M 12	D 19	Y 13	Amount \$200.00
City Columbus	State OH	Zip Code 43219-2967	Form (Cash, Check, etc.) Check			

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

Total expenditures this event.

\$9,250.00
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\$1,195.95
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Page Total \$ <u>450.00</u>
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